IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

OLIFF & BERRIDGE, PLC
P.O. Box 19928
Alexandria, Virginia 22320
Telephone: (703) 836-6400
Facsimile: (703) 836-2787

Customer Number: 25944

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Attorney Docket No.: 117022

MAIL STOP PATENT APPLICATION

MAIL STOP PATENT APPLICATION

NONPROVISIONAL APPLICATION TRANSMITTAL
RULE §1.53(b)

Transmitted herewith for filing under 37 C.F.R. §1.53(b) is the nonprovisional patent application

Masami NIIMI By (Inventors): 冈 Formal drawings (Figs. 1-7; 5 sheets) are attached. Use Figure ____ for front page of Publication.

A Declaration and Power of Attorney is filed herewith. This application claims benefit of Provisional Application No. filed (A Preliminary Amendment is attached to reflect this claim in the Specification if not already present.) This patent application is assigned to DENSO CORPORATION. The executed Assignment is filed herewith. An Information Disclosure Statement is filed herewith. Entitlement to small entity status is hereby asserted. A Preliminary Amendment is filed herewith. Priority of foreign application(s) No. 2002-270041 filed September 17, 2002 in Japan is claimed (35 U.S.C. §119). A certified copy of the above corresponding foreign application(s) is filed herewith. This application is NOT to be published under 35 U.S.C. 112(b). The undersigned attorney or agent hereby certifies that the invention disclosed in this application has not been and will not be the subject of an application filed in another country, or under a multilateral international agreement, that requires publication at eighteen months after filing. \boxtimes The filing fee is calculated below:

CLAIMS IN THE APPLICATION AFTER ENTRY OF ANY PRELIMINARY AMENDMENT NOTED ABOVE

STARTER

FOR:	NO. FILED	NO. EXTRA
BASIC FEE		
TOTAL CLAIMS	8 - 20	= 0
INDEP CLAIMS	1 - 3	= 0
☐ MULTIPLE DEPENDENT CLAIMS PRESENTED		

* If the difference is less than zero, enter "0".

	OTHER THAN A
ALL ENTITY	SMALL ENTITY

DIVITABLE DIVITAL		
RATE	FEE	<u>OR</u>
	\$ 375	<u>OR</u>
x 9=	\$	<u>OR</u>
x 42 =	\$	OR
+ 140 =	\$	OR
TOTAL	\$	OR
. ~ £. ~ !	and Even	

RATE	FEE	
	\$ 750	
x 18	\$	
x 84	\$	
+ 280	\$	
TOTAL	\$ 750	

Check No. 145966 in the amount of \$750 to cover the filing fee is attached. Except as otherwise noted herein, the Commissioner is hereby authorized to charge any other fees that may be required to complete this filing, or to credit any overpayment, to Deposit Account No. 15-0461. Two duplicate copies of this sheet are attached.

Respectfully submitted.

James A. Oliff

SM

Registration No. 27,075

Thomas J. Pardini Registration No. 30,411

 \boxtimes

For (Title):